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DEPT. COMM. NO. 443

STATE OF HAWAI'I | *KA MOKU'ĀINA O HAWAI'I*
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES | *KA 'OIHANA LOIHELU A LAWELAWE LAULĀ*

OFFICE OF ENTERPRISE TECHNOLOGY SERVICES | *KE'ENA HO'OLANA 'ENEHANA*

P.O. BOX 119, HONOLULU, HAWAII 96810-0119

July 31, 2026

The Honorable Ronald D. Kouchi
President of the Senate
and Members of the Senate
Thirty-Third State Legislature
State Capitol, Room 409
Honolulu, Hawai'i 96813

The Honorable Nadine K. Nakamura
Speaker and Members of the
House of Representatives
Thirty-Third State Legislature
State Capitol, Room 431
Honolulu, Hawai'i 96813

Aloha Senate President Kouchi, House Speaker Nakamura, and Members of the Legislature:

Pursuant to HRS section 27-43.6, which requires the Chief Information Officer to submit applicable independent verification and validation (IV&V) reports to the Legislature within ten days of receiving the report, please find attached the March 2026 report for the State of Hawai'i Department of Human Services, Child Welfare Services Branch, HI-THRIVE Modernization Project, as received by the Office of Enterprise Technology Services.

In accordance with HRS section 93-16, this report may be viewed electronically at http://ets.hawaii.gov (see "Reports").

Sincerely,

Christine M. Sakuda
Chief Information Officer
State of Hawai'i

Attachments (2)

Hawai'i Department of Human Services

Child Welfare Services

HI THRIVE (Comprehensive Child Welfare Information System)

IV&V MONTHLY STATUS DASHBOARD March 2026 Draft v1

IV&V Monthly Executive Summary

IV&V Project Health Metrics

Project Metrics shifted in a positive direction this month with the approval of the re-baselined project schedule. Budget still shows RED due to Planned Value not being realized against Earned Value.

Budget RED, **Quality** GREEN, **Schedule** GREEN, **Scope** GREEN

February 2026 Executive Summary

IV&V acknowledges the continued progress made by the HI-THRIVE Program Management Office (PMO) during the current reporting period in advancing several agency-led governance activities.

In 10-2025, the State of Hawai'i requested a Corrective Action Plan (CAP) from the Vendor following a voluntary Stop-Work action initiated by the Vendor. The Vendor resumed work in 12/25 and began development of a CAP response due in 1-2025. During the January and February reporting periods, the Vendor was unable to deliver a fully compliant CAP that adequately mitigated the impacts of the Stop-Work action, including effects to project schedule and planned Go-Live activities. The 3rd iteration of the CAP is currently under review by the State and approval is now expected 4-2026.

The Vendor completed and received approval for a schedule re-baseline in the March reporting period that extended the planned Go-Live from 8/2026 to 10/2026 and consolidated multiple single threaded tasks into parallel implementations paths. IV&V believes that the updated schedule provides a an achievable Go-Live date, however there will need to be an increased focus on quality, on-time delivery, and resource management to ensure success in the planned timeframe. The updated schedule also resulted in multiple deficient project metrics improving during March to acceptable reporting levels. Due to the previous deficient history and earned value reporting methods some metrics improved but still show risk.

The HI-THRIVE team prepared and submitted the As-Needed Advance Planning Document (APD) update and is waiting for approval from ACF.

The Vendor team and HI-Thrive team have continued to coordinate the development and submission of targeted revisions to multiple Deliverable Expectation Documents (DEDs) to improve clarity and alignment with project execution. The DEDs have included updated Acceptance Criteria and definitions that should provide a positive improvement to the quality of the submitted deliverables.

IV&V continued its review of Vendor deliverables and maintained close coordination with the HI-THRIVE PMO throughout the reporting period. IV&V observed that Vendor deliverable development quality has improved, however some rejections have continued to occur during the reporting period. Contract deliverables have consistently required on average, more than three iterative revisions prior to approval. Improvements to deliverable quality processes are expected to be addressed through an approved CAP mitigation strategy.

IV&V Sprint and Focus Area Health

IV&V Focus Area Health metrics are derived from conformance with the eight IV&V technical focus areas: Technical Project Management, Support, Architecture, Continuous Delivery, Product Increment Planning, Development, Implementation, and Project Closure.

Overall, the Vendor continues to demonstrate steady improvement in Sprint execution and predictability over the reporting period. Story completion rates have improved significantly since early Sprints, with Sprints 3 through 6 consistently delivering near or at planned story targets. Sprint 4 achieved full alignment between planned and actual delivery, indicating a peak in performance stability.

Planned Velocity Deviation (V-Diff) shows continued improvement and stabilization, reflecting better estimation accuracy and Sprint planning discipline. Minor variation remains in Sprint 6, but overall deviation trends are improving compared to earlier Sprints.

Actual Velocity has shown progressive stabilization, with consistent delivery throughput from Sprint 3 onward. While slight variability remains, performance is trending toward predictable and sustainable delivery.

Defect performance shows notable improvement compared to early Sprints, with a significant reduction in defect volume by Sprint 4. Although defects increased slightly in Sprints 5 and 6, levels remain substantially lower than initial Sprints, indicating improved quality control and testing practices.

The Technical Defect to Story Ratio has improved significantly over time, moving from high ratios in early Sprints to substantially lower levels in later Sprints. While there is a slight increase in Sprint 6, the ratio remains within a manageable range, suggesting continued effectiveness of defect remediation processes.

Overall, Sprint performance reflects maturing delivery practices, improved estimation accuracy, and enhanced quality management, with only minor variability in recent Sprints

IV&V Technical Project Management Health

- Technical Project Management IV&V Focus Area shifted from RED to GREEN with the Schedule re-baseline. IV&V will continue to monitor schedule management and delivery to planned dates closely over the following reporting periods.

IV&V Support Focus Area Health

- The Support Focus Area has shifted from RED to GREEN with the Schedule re-baseline, approval of the SI-14 Functional Design Deliverable, and improvement of defect management in the Sprint processes. IV&V will continue to monitor deliverable quality and defect management in the Sprints.

IV&V Architecture Focus Area Health

- There were no new observations for Architecture in March.

IV&V Continuous Delivery Focus Area Health

- The Continuous Delivery Focus Area shifted from from RED to GREEN with the IV&V access to Test-Rails. IV&V is currently assessing the historical and current Sprint data available in Test Rails.

IV&V Product Increment Planning Focus Area Health

- The Product Increment Planning Focus Area continued GREEN for Product Increment Planning due to improved Sprint processes. IV&V will continue monitoring current and future Sprints for improvements.

IV&V Development Focus Area Health

- The Development Focus Area continued GREEN Development due to improved Sprint processes. IV&V will continue monitoring current and future Sprints for improvements.

IV&V Implementation Focus Area Health

- The Implementation Focus Area shifted from YELLOW to GREEN due to the update to the planned Go-Live and approved re-baselined schedule.

IV&V Active Observations:

Medium Observation 7.0.1 Resource Availability Risk for UAT and Training Activities

- The HI THRIVE team is managing ongoing procurement activities and resource allocations for UAT and Training

Medium Observation 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools.

- IV&V has observed has observed improvements in the pre-Sprint planning processes and will continue monitoring the remainder of Sprint processes through Sprint 6 and beyond. IV&V has received access to the Test Rails tool and is analyzing historical and current test quality trends.

Medium Observation 5.0.2 Lack of Technical Debt Transparency

- Observed improvement that the Vendor is managing the technical debt, and transparency.

Medium Observation 1.1.6 Lack of approved UAT Plan creates risks in project schedule development and project task management

- State and PMO will re-engage Cardinality to develop the plan in alignment with approved re-baselined project schedule.

IV&V Active Observations Summary Description

The IV&V Active Observations Summary describes the current Active Observations for this reporting month at a high level. There were four Observations open during the reporting period. Details can be requested through Hawai'i DHS if the table is not readable.

- Medium Observation 7.0.1 Resource Availability Risk for UAT and Training Activities
- Medium Observation 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools.
- Medium Observation 5.0.2 Lack of Technical Debt Transparency
- Medium OIbservation 1.1.6 Lack of approved UAT Plan creates risks in project schedule development and project task management.

IV&V Active Observations Summary

IV&V Observation Number	Observation Title	IV&V Recommendation	State Current Update	IV&V Current Update	Priority	Owner	Date Identified
6.1.1	6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools	Recommendations for 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools: Recommendation 6.1.1.1 Provide HI THRIVE and IV&V with read-only access to TestRail and defect tracking tools Recommendation 6.1.1.2 . Improve the accuracy and timeliness of daily standup and weekly Jira reports. Recommendation 6.1.1 3. Incorporate IV&V recommendations into Agile ceremonies, ensuring sprint reviews include transparent defect, backlog, and progress reporting. Recommendation 6.1.1 4. Align issue tracking and reporting across Jira and Test Rails to ensure consistency, visibility, and compliance with contractual tracaability obligations.	March 26: Sprint quality has improved, although shortcomings still exist - particularly in backlog. CAP to formally manage this process is awaiting State approval.	March 2026 IV&V recommendation 6.1.1.1 Provide HI THRIVE and IV&V with read-only access to TestRail and defect tracking tools. - This recommendation has been met by Vendor and can be closed. IV&V recommendation 6.1.1.2 Improve the accuracy and timeliness of daily standup and weekly Jira reports. - This recommendation has been met by Vendor and can be closed. IV&V recommendation 6.1.1.3 Incorporate IV&V recommendations into Agile ceremonies, ensuring sprint reviews include transparent defect, backlog, and progress reporting. - This recommendation has been partially met, defect and backlog reporting has not been incorporated into daily standup and sprint close out and still need to be performed by Vendor. IV&V recommendation 6.1.1.4. Align issue tracking and reporting across Jira and Test Rails to ensure consistency, visibility, and compliance with contractual traceability obligations. - This recommendation has been met and can be closed. IV&V concurs with state initial response.	Medium	Michael Armstrong	10/01/25
5.0.2	Description 5.0.2 Lack of Technicel Debt Transparency	Recommendation 5.0.2.1 IV&V recommends introducing a technical debt metric into the weekly status reporting process that tracks newly introduced technical debt versus technical debt retired, including the number of new bugs and a trend indicator to support early detection of unacceptable growth.	March 2026 Cardinality has begun to conduct retrospective meetings in alignment with the CAP. However these are yet to fully address technical debt. HI THRIVE will engage Cardinality in this issue as part of CAP monitoring	March 2026: Recommendation 5.0.2.1 IV&V recommends introducing a technical debt metric into the weekly status reporting process that tracks newly introduced technical debt versus technical debt retired, including the number of new bugs and a trend indicator to support early detection of unacceptable growth. - This recommendation has been partially	Medium	Michael Armstrong	12/30/25

				has been partially fulfilled. IV&V acknowledges that technical debt increment planning sessions were scheduled during this reporting period. The recommendation to implement and report on weekly technical debt metrics has not been implemented and the Vendor still needs to complete this activity.			
7.0.1	7.0.1 Resource Availability Risk for UAT and Training Activities	Recommendation 7.0.1.1 IV&V recommends that the State re-consider the short-term use of tamporary staffing resources to backfill critical permanent roles during these phases to reduce schedule, quality, and go-live readiness risks. Recommendation 7.0.1.2 IV&V recommends that the State submit an as needed APD to document the staffing approach, duration, cost estimates, and cost allocation methodology, and obtain the required approvals in accordance with 45 CFR §§95.605, 95.611, and 95.821, and 2 CFR §200.405, prior to implementation and claiming Federal Financial Participation (FFP). Under 45 CFR §95.611 and §95.621: If an as needed APD is required this document should Identify the temp staffing resource requirements and explain why it's needed; (describe the duration and transition plan).	March 2026: Anticipated procurement for UAT assistance is dependent upon Federal approval of the the APDU document submitted in February. Approval has not yet been received. In parallel, HI THRIVE has communicated to the wider stakeholder community the timing and nature of UAT and has begun to identify particpants	March 2026 : IV&V observed that HI THRIVE still awaiting ACF APD approval for contracting.	Medium	Steve Clarke	12/30/25
1.1.6	1.1.6 Lack of approved UAT Plan creates risks in project schedule development and project task management	Recommendation 1.1.6.1 IV&V recommends that the HI THRIVE PMO, with the support of the SI Vendor, develop and approve a DHS UAT Plan in coordination with the re-baseline and management of the project schedule. The plan should include: 1. Defined entry and exit criteria (for all parties) 2. Test cycle structure, timing duration, timing dependency assumptions 3. Tester roles, staffing levels, and availability commitments 4. Defect severity definitions and resolution timelines 5. Retesting and regression expectations 6. Acceptance approval authority and decision criteria Recommendation 1.1.6.2 IV&V recommends that project schedule commitments be evaluated to align with approved UAT Plan assumptions related to duration, dependency, and roles	New Observation No Update Required.	March 2026 Recommendation 1.1.6.1 IV&V recommends that the HI THRIVE PMO, with the support of the SI Vendor, develop and approve a DHS UAT Plan in coordination with the re-baseline and management of the project schedule. - IV&V observes that a task for development of a UAT Plan has been added to the schedule. IV&V has not observed the creation of tasks for building a DED or meetings/activities necessary to develop information to include in the plan. Recommendation 1.1.6.2 IV&V recommends that project schedule commitments be evaluated to align with approved UAT Plan assumptions related to duration, dependency, and roles. - The single task for UAT Plan is dependent on the Vendor "Conduct UAT Process Training". IV&V has not observed the development of process training matarials or other activities that would support readiness for the State development of the UAT Plan. DHS anticipating receiving additional information on the UAT Process Training and planning. DHS to follow-up 2nd week of April.	Medium	marmstrong@dhs.hawaii	02/20/26

IV&V Monthly Overall Project Health Description

This area provides summary stoplight indicators of overall IV&V assessed Project Health during the reporting period including Overall, Budget Health, Quality Health, Schedule Health, and Scope Health.

Project Health has shown significant improvement with the approval of a re-baselined schedule in the reporting period. The planned Go-Live has been extended from 8-2026 to 10-26 and multiple activities have been paralleled to improve efficiency. Budget is still showing RED due to Planned and Earned Value being less than what is expected at this point in the project.

Details can be requested through Hawai'i DHS if the table is not readable.

IV&V Monthly Overall Project Health

Overall Project Status	Monthly Budget Health	Monthly Quality Health	Monthly Schedule Health	Monthly Scope Health
				

Monthly Project Sprint Health Description

This Monthly Project Sprint Health area provides numbered metrics that indicate health of the ongoing development Sprints during the reporting period. The areas reported are Sprint ID, Planned Storied, Actual Stories, Planned Points, Actual Points, Planned Duration, Actual Duration, Planned Velocity, Actual Velocity, Defects, Acceleration, Planned Velocity Deviation (V-Diff) %, Technical Defect to Story Ratio.

Overall, the Vendor continues to demonstrate steady improvement in Sprint execution and predictability over the reporting period. Story completion rates have

improved significantly since early Sprints, with Sprints 3 through 6 consistently delivering near or at planned story targets. Sprint 4 achieved full alignment between planned and actual delivery, indicating a peak in performance stability.Technical Debt and Defect management have improved over the previous reporting cycles as well, with the exception of an anomalous increase in technical debt in the last week of Sprint 6.

The details in the table may not render correctly in screen/text readers, details can be requested through Hawai'i DHS if the table is not readable

Monthly Project Sprint Health

Sprint	Planned Stories	Actual Stories	Planned Points	Actual Points	Planned Duration	Actual Duration	Planned Velocity	Actual Velocity	Defects	Acceleration	V-Diff %	TD Story Ratio
1	132	51	600	200	20	25	30	8	52	N/A	73.33%	39.39%
2	69	61	387	344	20	20	9.675	8.6	47	60.00%	11.11%	68.12%
3	90	89	486	481	20	20	12.15	12.03	26	3.43%	1.03%	28.89%
4	121	121	603	603	20	20	15.075	15.08	0	3%	0%	0%
5	134	121	655	604	20	20	16.375	15.1	13	3.00%	7.79	9.7%
6	111	108	555	521	20	20	13.875	13.03	29	-2.08%	6.13%	26.1%

Monthly Health Detail Description

The Monthly Health Detail area provides stoplight indicators of Technical Process Areas that are evaluated by the IV&V Team during the reporting period. This areas reported are Health Overall, Budget Overall, Cost Variance Ration, Schedule Performance Indicator, Quality Overall, Deliverable Quality, Deliverable Schedule Variance, Requirements Process Quality, Design Process Quality, Sprint Process Quality, Test Process Quality, Schedule Overall, Milestone Variance, Schedule Variance, Scope Overall.

For the March 2026 reporting period, the majority of Technical Process Areas are Green, indicating strong overall project performance and improved stability across quality, schedule, and delivery metrics. Health Overall, Quality Overall, Schedule Overall, and Scope Overall are all Green, reflecting consistent progress and effective management of project activities. Most of the improvements resulted from the re-baseline of the project schedule in the March reporting period.

This improvement is primarily attributable to the successful re-baselining of the project schedule, which has realigned project timelines, deliverables, and performance expectations with current execution capacity. The re-baseline has enabled more accurate tracking of progress and has contributed to improved schedule adherence and overall metric performance.

Budget performance is also Green; however, the Cost Variance Ratio (CVR) is Red, driven by a significant under-budget variance. While this reflects lower-than-planned expenditures, the variance exceeds acceptable thresholds and will require continued monitoring to ensure appropriate resource utilization and alignment with project needs.

Quality-related metrics, including Deliverable Quality, Requirements Process Quality, Design Process Quality, Sprint Process Quality, and Test Process Quality, are consistently Green, demonstrating improved adherence to processes and higher-quality outputs from the Vendor.

Schedule-related metrics, including Schedule Performance Indicator, Deliverable Schedule Variance, Milestone Variance, and overall Schedule Variance, are performing within acceptable thresholds, supporting a Green Schedule Overall status.

Overall, Project Health reflects a positive trajectory driven by the re-baselined schedule and improved execution discipline, with the primary exception being the CVR metric, which will require continued oversight as the project progresses.

Details can be requested through Hawai'i DHS if the table is not readable

Monthly Project Health Detail

Project Health Area	Trend	3/26	2/26	1/26	12/25	11/25	10/25	9/25	8/25	7/25	6/25	Baseline	Details:
Health Overall	↑	8.74%	24.35%	20.72%	19.64%	17.60%	17.30%	17%	19%	18%	15%	14%	Metric improved with new re-baselined schedule.
Budget Overall	↓	69.72%	66.18%	63%	63%	63%	63%	63%	63%	66%	55%	33%	Metric will not improve until EV and PV change.
Cost Variance Ratio	↑	69.72%	-	-	-	-	-	-	-	-	-	-	Cost Variance is less than 1.
Schedule Performance Indicator	→	30%	30%	30%	25%	24%	24%	24%	21%	19%	61%	61%	Metric will not improve until EV and PV change.
Quality Overall	↑	2.69%	46.82%	34.37%	31.48	30%	29%	27%	41%	34%	29%	29%	Metric improved with new re-baselined schedule.
Deliverable Quality	→	7.50%	7.50%	8.62%	9.42%	9.90%	11%	10%	12%	10%	10%	8.50%	Metric improved with new re-baselined schedule.
Deliverable Schedule Variance	↑	-26.31%	266.46%	189.01%	130.35%	152%	147%	141%	232%	191%	132%	126%	Metric improved with new re-baselined schedule.
Requirements Process Quality	→	0%	0%	0%	0%	0%	0%	0%	-	-	-	-	
Design Process Quality	→	0%	0%	0%	2.20%	2.20%	14%	2.25%	-	-	-	-	
Sprint Process Quality	↑	16.13%	41.62%	42.95%	14.96%	18%	40%	56%	-	-	-	-	Sprint Technical Debt management has improved.
Test Process Quality	↑	-	-	-	-	-	-	-	-	-	-	-	Test Rail access granted, IV&V analyzing.
Schedule Overall	↑	7.69%	27.89%	25.16%	23.47%	18%	17.30%	17%	15%	14%	12%	9.50%	Metric improved with new re-baselined schedule.
Milestone Variance	↑	-6.25%	27.62%	26.10%	15.00%	15%	15%	15.30%	14%	12%	15%	9.60%	Metric improved with new re-baselined schedule.
Schedule Variance	↑	21.64%	28.87%	24.21%	24.10%	20%	17.30%	17%	16%	16%	15%	14.38%	Metric improved with new re-baselined schedule.
Scope Overall	→	-	-	-	-	-	-	-	-	-	-	-	No changes to scope that impact budget.
Change Request Ratio	→	-	-	-	-	-	-	-	-	-	-	-	No defined scope changes.

IV&V Project Health by Focus Area Description

The IV&V Project Health by Focus Area area provides stoplight indicators for specific IV&V Technical Process Areas that are evaluated by the IV&V Team during the reporting period. The Technical Process areas are 1.0 Technical Project Management, 2.0 Support Processes, 3.0 Solution Architecture, 4.0 Continuous Delivery, 5.0 Product Increment Planning, 6.0 Development Processes, 7.0 Implementation Processes, 8.0 Project Closure.

All Focu Areas have shown improvement with the approval of the re-baselined schedule.

Details can be requested through Hawai'i DHS if the table is not readable

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IV&V Project Health by Focus Area

IV&V Focus Area	Previous Month's Health	Current Month's Health	Comments
1.0 Technical Project Management			Re-baselined schedule corrected deficiency.
2.0 Support Process IV&V			Re-baselined schedule corrected deficiency.
3.0 Solution Architecture			No observations.
4.0 Continuous Delivery			IV&V access to Test Rails granted.
5.0 Product Increment Planning			Sprints 1-5 delivered according to plans.
6.0 Development IV&V			Sprints 1-5 delivered according to plans.
7.0 Implementation IV&V			Re-baselined schedule corrected deficiency.
8.0 Project Closure			No data.

IV&V Project Health Metrics Legend Description

GREEN	YELLOW	RED	BLUE
Satisfactory – No corrective actions necessary. All life cycle activities conform to requirements. Implemented processes are satisfactory. Risks or issues may exist and contain appropriate mitigation or resolution steps and the project is adequately addressing them. The current technical risk to the project and software quality is low. <10% Variance	Caution – There may be a need for corrective action now or quite soon. Some life cycle activities are not in alignment with requirements. Some processes may require process improvements. Risks or issues are often not identified or contain stale mitigation or resolution steps. The current technical risk to the project and software quality is moderate. > 10% and < 20% Variance	[redacted]	Not enough data is available to make a determination about project health.

Observations Active During Month Description

The IV&V Active Observations Summary describes the current Active Observations for this reporting month in more detail than the previous summary. There were four Observations open during the reporting period. Details can be requested through Hawai'i DHS if the table is not readable.

Medium Observation 7.0.1 Resource Availability Risk for UAT and Training Activities

Medium Observation 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools.

Medium Observation 5.0.1 Sprint Iterations are not utilizing effective sprint planning processes.

Medium Observation 5.0.2 Lack of Technical Debt Transparency

IV&V Observations Active During the Month

Observation Title	IV&V Observation Description	IV&V Impact Description	IV&V Recommendation	State Current Update	State Ongoing Update	IV&V Current Update	IV&V Ongoing Update
6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools	Observation 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools. The IV&V team observes that the SI Vendor's current Agile practices and supporting tools do not provide adequate visibility or accountability for HI THRIVE. Specifically, IV&V has been denied visibility into defects, which limits its ability to conduct independent verification. Daily standups during Sprint 1 have not been accurately reported, and Jira reports from daily standups and weekly status updates are either missing or untimely. While the vendor is effectively using TestRail internally, access has been denied to both HI THRIVE and IV&V, further reducing transparency. Additionally, the vendor continues to disregard IV&V recommendations to enhance Agile ceremonies, including accurate sprint reporting and improved utilization of configuration management tools.	Impact 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools. These gaps result in limited traceability, reduced confidence in reporting accuracy, and the inability of IV&V to validate progress or identify risks in a timely manner independently. The lack of standardized reporting and access to tools prevents DHS and ACF from obtaining a clear view of project health, scope control, and quality outcomes.	Recommendations for 6.1.1 Ineffective Transparency and Reporting in Agile Ceremonies and Tools: Recommendation 6.1.1.1 Provide HI THRIVE and IV&V with read-only access to TestRail and defect tracking tools Recommendation 6.1.1.2 . Improve the accuracy and timeliness of daily standup and weekly Jira reports. Recommendation 6.1.1 3. Incorporate IV&V recommendations into Agile ceremonies, ensuring sprint reviews include transparent defect, backlog, and progress reporting. Recommendation 6.1.1 4. Align issue tracking and reporting across Jira and Test Rails to ensure consistency, visibility, and compliance with contractual traceability obligations.	March 26: Sprint quality has improved, although shortcomings still exist - particularly in backlog. CAP to formally manage this process is awaiting State approval.	February_2: CAP v4 received by DHS and under review. Should represent the collaborative meeting decisions and result in a quick approval. February_1: DHS updated CAP Response Table v3.0 from Cardy, incorporating ANSA & TMS feedback to strengthen their action plans, requiring adherence to stricter Agile best practices. Awaiting approval from executive leadership on recommended actions. January_3: Cardy responded to the Sprint 3 retrospective deficiencies with how they would deal with each. DHS responded with issues found within their action items to address the issues. Awaiting Cardy response. The CAP is still under DHS review. January_2: Items in test report email were added to the Sprint 3 Retrospective. Email sent to request Cardy to follow-up with staff and the project team on action items from that meeting. The CAP was received 1/12 and is currently under DHS review. January_1: No response was received from DHS test report email. This will be brought up during the Sprint 3 retrospective. CAP is due 1/12/26 so agile ceremony action plans can be assessed at that time.December_2: 6.1.1.2 Email was sent to Cardy regarding deficiences in the test reporting. IV&V and DHS need to do an updated analysis on the Weekly and Final Sprint reports. 6.1.1.3 The CAP has been redesigned to require a f C d t	March 2026 IV&V recommendation 6.1.1.1 Provide HI THRIVE and IV&V with read-only access to TestRail and defect tracking tools. - This recommendation has been met by Vendor and can be closed. IV&V recommendation 6.1.1.2 Improve the accuracy and timeliness of daily standup and weekly Jira reports. - This recommendation has been met by Vendor and can be closed. IV&V recommendation 6.1.1.3 Incorporate IV&V recommendations into Agile ceremonies, ensuring sprint reviews include transparent defect, backlog, and progress reporting. - This recommendation has been partially met, defect and backlog reporting has not been incorporated into daily standup and sprint close out and still need to be performed by Vendor. IV&V recommendation 6.1.1.4. Align issue tracking and reporting across Jira and Test Rails to ensure consistency, visibility, and compliance with contractual traceability obligations. - This recommendation has been met and can be closed. IV&V concurs with state initial response.	February 26: Status unchanged from January, CAP and Schedule still under development as of January 31. Test Rails access still open. January 26: 1/12 CAP response stated Vendor will provide DHS 2 licenses of Test Rails Jan 31. Monitor that licenses and access are granted.December IV&V Ongoing Update: Recommendation 6.1.1.1 Access to Test rails and the underlying test data has not been addressed. Recommendation 6.1.1.2 weekly test report and stetus reporting has been partially addressed the following list of JIRA items require confirmation: Enforce mandatory resolution settings for closed issues. Configure a "Risk Rating" custom field. Establish a regular permissions review cycle. Set up filter subscriptions (daily/weekly digests). Use JQL filters and dashboards for SLA tracking. Implement recurring audit and access reviews (e.g., quarterly) Adopt standard Epic usage for roadmap and reporting alignment. 6.1.1.3 Scrum practice improvements have been observed. Lack of visible velocity during the initial half of each sprint cycle continues to be exhibited in S3 and S4.November 25: Although the SI Vendor has not yet begun Sprint 3 Agile ceremonies, IV&V notes a positive improvement in the Sprint 3 Planning i h Id ith HI

					response from Cardy to the agile ceremony issues. December: The state has not received the outstanding Jira bulleted list from IV&V. Once received, we will determine our responses for each and either close or communicate to Cardy for correction. November_2: The CAP has been reviewed and none of the items raised by IV&V were addressed by Cardy with corrective actions. IV&V's CAP response was received by DHS and is under review while DHS formulates their response. November_1: CAP response was received by DHS on 11/10/25 and currently under review. Cardy's responses will effect the state's actions for 6.1.1.1, 6.1.1.3, and 6.1.1.4. For 6.1.1.2, Cardy informed DHS on 11/10/25 that sprint work is still halted. PMO Services recommended that DHS do not move forward with Sprint 2 Retrospective or Sprint Reports until work halt is lifted as these are included within sprint work per Agile best practices and Cardy's SDLC process doc. October: 6.1.1.1, 6.1.1.3, and 6.1.1.4 are part of the Corrective Action Plan. This has been provided to executive leadership and planned to be sent to Cardy by EOD 10/28/25. 6.1.1.2 another email was sent to Cardy on 10/22 specific to issues found in the Sprint 2 test reports. If no response is received from Cardy by 11/3/25 (or 2 days after project work resumes), a project risk will be raised.		sessions held with HI THRIVE business stakeholders. The SI team demonstrated increased patience and structure during requirement walkthroughs—reading each functional requirement aloud, asking for comments or concerns, and confirming stakeholder acceptance before moving to the next User Story. This improvement supports better shared understanding and early alignment. These improvements represent early progress toward addressing transparency gaps noted in Observation 6.1.1. While Agile ceremonies and tool-based reporting have not yet met expectations, the more deliberate approach during Planning is helping improve engagement and clarity. However, traceability and reporting visibility remain limited due to the lack of active Sprint ceremonies and insufficient updates in Jira and related tools. There still exists a lack of visibility of overall work accomplished and accurate velocity of work. The Vendor is working at the sub-task level, however the sub-tasks are not effectively aggregated to show progress to the parent tasks (User Stories). 38 functional stories 52 technical stories (486 points), 105 functional sub-tasks associated with only 15 complete, however only 1 user story is complete with 2 subtasks. Sprint 30% complete. Subtasks are increasing as the sprint moves along without visibility to the impact to overall scope of work. Without a report/dashboard that associates sub-tasks to user stories there is reduced visibility of risk to user story progress and reduced visibility of actual work being accomplished. Daily ceremonies focus on the individual discreet tasks but there is no visibility to overall status/priority that should help determine the cadence and path of work being picked up/assigned. Initial update: Not required on initial observation - Observation type is neutral until it is reviewed by the State and Priority is Medium.
5.0.1 Sprint Iterations are not utilizing effective sprint planning processes	5.0.1 Vendor's current sprint process combines sprint planning (Increment Planning) with delivery execution	5.0.1 The combination of sprint planning and delivery execution results in an inefficient project schedule and negatively impacts the project team's capability to measure execution burn down across sprints. The first week of each sprint is currently dedicated to sprint planning, no actual sprint configuration and test activities occur until week two. This results in an involuntary stop for the majority of the development and quality assurance team every fourth week with development and QA sprinting at only 75% of their true capacity. Combining the planning and execution in a single sprint has a secondary negative impact of deferring	Recommendation 5.0.1.1 IV&V recommends that the Vendor adopt a SAFe model I1.S1 , I1.S2 , I1.S3, I1.S4 (IP); I2.S5.... With a shortened 1 week Increment Planning sprint occurring once per team for every 3 , three week sprints increasing the overall team efficiency 15% to 90%.	March 26: Sprint quality has improved, although shortcomings still exist - particularly in backlog. CAP to formally manage this process is awaiting State approval. February_2: CAP v4 received by DHS and under review. Should represent the collaborative meeting decisions and result in a quick approval. February_1: Cardy provided action items to correct deviations provided during the retrospective. Also, the CAP has been updated to require strict adherence to Agile best practices. If these action plans are incorporated into Cardy's processes, they should correct this observation.	January_3: Cardy responded to the Sprint 3 retrospective deficiencies with how they would deal with each. DHS responded with issues found within their action items to address the issues. Awaiting Cardy response. January_2: This was added to the sprint retrospective feedback. Requested Cardy to follow-up with DHS on the feedback. January_1: Sprint 4 seems to have the same burndown patterns as 2 and 3. Cardy mentioned they were going to become more efficient with automatad testing and base functionality testing but that is not visible in Jira. This will be brought up during the Sprint 3	March: IV&V notes that Recommendation 5.0.1.1 is no longer applicable as project execution has progressed beyond early sprint planning stages. With functional sprints nearing completion, adopting a SAFe model would not provide meaningful benefit. The finding has been overtaken by project maturity and current delivery phase.	February 26: Status unchanged from January, CAP and Schedule still under development as of January 31. January 26: 1/12 CAP response under review for Vendor actions related to transparency. IV&V recommendation for greater transparency and supporting JIRA documentation for technical sprint activities remains in place. December 25: IV&V observes positive improvement in preparation for S4 and recommend closure of this item. December 25: Sprint 3 in progress IV&V continuing observation. Planning review cycle

		burndown against story points until one third into the sprint.			retrospective. December_2: The State informed Cardy during the PM Circle on 12/16 that the burndown trend has issues that seem to be stemming from QA as we are now 2 days to completion but only 47% complete with 23 outstanding defects. We requested they conduct an in-depth analysis to determine the root cause of this trend and a mitigation for Sprint 4. December: DHS is seeing similar patterns in Sprint 3 where there is a bottleneck with testing which is causing the downwerd burndown trend to start very late in the sprint. This will be raised in the Sprint 3 retrospective and require Cardy to provide a solution for correction to be implemented prior to Sprint 5 Planning. November: Cardy informed DHS on 11/10/25 that sprint work is still halted. This observation cannot be addressed until sprint work resumes.		was shortened but was still incorporeted into the development cycle. Entered Sprint with all functional pre-Sprint items completed and set to ready, prior to the Product Owner meeting and validated each functional item during the PO meeting; technical items were no reviewed with any party Recommend that the ready for development and date of readiness are both not populated prior to the pre-sprint review meeting. IV&V continues to recommend thet HI-THRIVE technical personnel (Michael or ETS) review and approve the readiness of the technical User Stories prior to sprint initiation. HI-THRIVE/ETS should require all technical items be reviewed prior Sprint, however a process will need to be developed for that and technical resources assigned from Hawai'i.
Observation 2.0.5 Inconsistent Vendor inclusion of IV&V and other staff in project meetings	Observation 2.0.5 IV&V has requested that the Vendor include all IV&V staff in each technical, testing, or project meeting that is scheduled on multiple occasions through the previous 12 months. IV&V Consulting Manager has provided the list of IV&V staff with associated contact information to the Vendor as part of the previous requests. Invitation to requested meetings continues to be inconsistent for the total invitations and the included IV&V staff. There is a realized risk that one or all necessary IV&V staff will not be provided notice to required meetings and due to the large distribution lists of project meetings reviewing the list of each meeting to determine if staff members are missing is not a feasible action for remediation. This observation has also been inconsistently observed through the life of the project for other project area resources being left off required distribution lists for project meetings.	Impact 2.0.5 Loss of visibility to Vendor activities and processes.	Recommendation 2.0.5.1 IV&V recommends the Vendor improve their communicetion support processes to ensure there are validation checks in place for proper inclusion of required project resources for Vendor managed meetings.	February_1: DHS recommends closure of this item. January_3: There seems to be a visible improvement with everyone ensuring the correct meeting attendees are included on the invite. IV&V will need to inform DHS if they are still encountering issues or if this can be closed. January_2: Created Smartsheet sheet that contains required and optional attendees for each team that the project team must adhere to.		February 26: IV&V has observed some instances of meetings missing the required participants, however this is still an improvement from previous months. IV&V agrees with recommendation to close. This observation will close in the February reporting period. January 26: IV&V inclusion in meetings by the Vendor has improved in the 2 weeks since the Vendor wes notified of inconsistencies. This Observation will continue to be monitored.	December 25: IV&V provided defined list of IV&V participants to be included in each meeting.
Description 5.0.2 Lack of Technical Debt Transparency	Description 5.0.2 IV&V observes that the HI-THRIVE project is accruing technical debt across successive sprints; however, the technical debt is not being substantively addressed or resolved within sprint execution. In accordance with IEEE 730–2014 Software Quality Assurance planning and control objectives, the project lacks a defined mechanism to meesure, monitor, and control the accumulation of technical debt. Metrics should be used to treck newly introduced technical debt versus technical debt retired, include the number of new bugs, and include a trend indicator to support early detection of unacceptable growth.Without these controls there is a risk the project will not receive early-warning to risks of exceeding thresholds for available sprint capacity the inability to prevent or reduce unplanned technicel debt.	5.0.2.1 A review of recent sprint outcomes indicates that available sprint capacity is primarily used to sustain existing functionality rather than to reduca accumulated technical debt. 5.0.2.2 This condition introduces a quality risk: unmanaged technical debt may compound over time, adversely affecting project scope, sprint timelines, team resources, testability, and future delivery output and velocity.	Recommendation 5.0.2.1 IV&V recommends introducing a technical debt metric into the weekly status reporting process that tracks newly introducad technical debt versus technical debt retired, including the number of new bugs and a trend indicator to support early detection of unacceptable growth.	March 2026 Cardinality has begun to conduct retrospective meetings in alignment with the CAP. However these are yet to fully address technical debt. HI THRIVE will engage Cardinality in this issue as part of CAP monitoring	February_2: CAP v4 received by DHS and under review. Should represent the collaborative meeting decisions and result in a quick approval. February_1: Cardy provided action items to correct deviations provided during the retrospective. Also, the CAP has been updated to require strict adherence to Agile best practices. If these action plans are incorporated into Cardy's processes, they should correct this observation. January_3: Cardy's response was that no technical debt exists to-date but thet they will address any in the sprint reports. The defects remaining after the closure of the sprint is being addressed as part of the defect triage request. Cardy has not responded to this request yet. A reminder email was sent by DHS.	March 2026: Recommendation 5.0.2.1 IV&V recommends introducing a technical debt metric into the weekly status reporting process that tracks newly introduced technical debt versus technical debt retired, including the number of new bugs and a trend indicetor to support early detection of unacceptable growth. - This recommendation has been partially fulfilled. IV&V acknowledges that technical debt increment planning sessions were scheduled during this reporting period. The recommendation to implement and report on weekly technicel debt metrics has not been implemented and the Vendor still needs to complete this activity.	February 26: IV&V observes improvement with the Vendor managing the technical debt, if not its transparency. Sprint 5 (S5) concluded with thirteen new defects all resolved prior to completion of the sprint. IV&V also observed during this period 115 sub tasks that were impacting 13 user stories 17 of which were still in progress at the completion of S5 and a further 98 that had the status of to do. IV&V racommends that HI-Thrive monitor this to ensure that stories being demonstreted for P.O acceptance are complete and defect free prior to scheduling their demonstration and that Cardinality accurately reflect impacted stories as incomplate and part of the technical debt to be resolved in the subsequent sprint. As such IV&V is reporting 90% of planned stories completed during S5.February 26: IV&V observes improvement that the Vendor is managing the technicel debt, if not its transparency. Naw TD Old TD Close in S Total TD Avg Time to Close S2 39 39 39.54874896 S3 27 21 45 34.80338258 S4 0 21 24 7 487473291

							7.487473291 S5 0 11 13 At the conclusion of S2 the number of defects carried forward into S3 (TD) was 39 ; this increased at the close of S3 to 45 with the addition of 27 unresolved defects (minus 21 S2 defects fixed during this period) Technical debt further reduced to 24 at the end of S4 with a further 21 defects fixed during S4 and is now at 13. We are also seeing improvements in the ageing defect values with a reduction in average time to resolve from 39 days to 7. These numbers were calculated by exporting all JIRA type=bug and then using the PO-Reviewed date to identify the sprint and comparing the created and resolved dates. January 26: Technical debt continues to increase without a defined mitigation plan or accurate prediction of growth. IV&V notes that the latest S2 sprint test closeout report (1/12/25) does not include aging metrics or a cumulative S1+S2 total for technical debt, Greater detail is expected with respect to which tests were deferred and the total of "partial executed" tests which were also excluded from the executive summary. December 25: Observation opened.
7.0.1 Resource Availability Risk for UAT and Training Activities	Observation 7.0.1 The project has identified risks related to the availability of State staff resources required to support User Acceptance Testing (UAT) and end-user training activities. Current permanent staffing levels are approximately 60% of authorized capacity due to ongoing retention and hiring challenges, and key staff assigned to UAT execution, defect validation, training delivery, and operational readiness continue to have competing operational responsibilities. IV&V notes that the latest Advance Planning Document Updats (APD-U), which has been submitted to the Administration for Children and Families (ACF) but not yet approved, does not include a staffing mitigation strategy to address this risk, such as the use of temporary staffing resources to backfill permanent steff during UAT and training. In accordanca with 45 CFR §§95.605, 95.611, and 95.621, staffing approaches and associated costs supporting implementation activities must be documented and approved in the applicable APD prior to implementation and claiming Federal Financial Participation (FFP).	Impact 7.0.1 If staffing availability constraints are not mitigated, UAT and training activities may be delayed or compressed, increasing the risk of incomplete test coverage, unresolved defects, and insufficient end-user readiness, which may adversely impact system quality and overall go-live readiness. Because the submitted APD Update (APD-U) has not yet been approved, any decision to implement temporary staffing outside the scope of the approved APD would require submission and approval of an As-Needed APD in accordance with 45 CFR Part 95. Absent timely APD approval, the use of temporary staffing resources could reault in delayed implementetion of mitigation actions or risk disallowance of associated costs and loss of Federal Financial Participation (FFP).	Recommendation 7.0.1.1 IV&V recommends that the State re-consider the short-term use of temporary staffing resources to backfill critical permanent roles during these phases to reduce schedule, quality, and go-live readiness risks. Recommendation 7.0.1.2 IV&V recommends that the State submit an as needed APD to document the staffing approach, duration, cost estimates, and cost allocation methodology, and obtain the required approvels in accordance with 45 CFR §§95.605, 95.611, and 95.621, and 2 CFR §200.405, prior to implementation and claiming Federal Financial Participation (FFP). Under 45 CFR §95.611 and §95.621: If an as needed APD is required this document should identfy the temp staffing resource requirements and explain why it's needed; (describe the duration and transition plan).	March 2026: Anticipated procurement for UAT assistance is dependent upon Federal approval of the the APDU document submitted in February. Approval has not yet been received. In parallel, HI THRIVE has communicated to the wider stakeholder community the timing and nature of UAT and has begun to identify particpants	February 18: UAT supporting procurement has been authored. Issuance of procurement is dependent upon receipt of ACF prior approval waiver introduced in the most recent APD submission. The State has not received feedback on this waiver request.	March 2026 : IV&V observed that HI THRIVE still aweiting ACF APD approval for contrecting.	New Observation No Update Required.
1.1.6 Lack of approved UAT Plan creates risks in project schedule development and project task management	1.1.6 IV&V observes that the project does not have an approved UAT Plan and rebaseline and development activities for a project schedule are underway. The project work plan contains User Acceptance Testing (UAT) durations and role expectations that lack documented validation against a HI THRIVE User Acceptance Test Plan. The schedule includes fixed UAT start and end dates; however, the project has not documented supporting assumptions such as entry and exit criteria, number of test cycles, defect resolution timeframes, Testar availability, test data preparetion, or acceptance decision procedures.	1.1.6 The absence of an approved UAT Plan increases the risk that activities planned during the schedule rebaseline may turn out to be invalid at the time UAT planning occurs. Not having a defined UAT planning baseline increases the risk that: • Defects will be discovered late in the implementation phase • Retesting effort will exceed the planned timeline • Business users will not have adequete time to validata system functionality	Recommendation 1.1.6.1 IV&V racommends that the HI THRIVE PMO, with the support of the SI Vendor, develop and approve a DHS UAT Plan in coordination with the re-baseline and management of the project schedule. The plan should include: 1. Defined entry and exit criteria (for all parties) 2. Test cycle structure, timing duration, timing dependency assumptions 3. Tester roles, staffing levels, and availability commitments 4. Defect severity definitions and resolution timelines 5. Retesting and regression expectations 6. Acceptance approvel authority and decision criteria Recommendation 1.1.6.2	New Observation No Update Required.	New Observation No Updata Required.	March 2026 Recommendation 1.1.6.1 IV&V recommends that the HI THRIVE PMO, with the support of the SI Vendor, develop and approve a DHS UAT Plan in coordination with the re-baseline and management of the project schedule. - IV&V observes that a task for development of a UAT Plan has been added to the schedule. IV&V has not observed the creation of tasks for building a DED or meetings/activities necessary to develop information to include in the plan.	New Observetion No Update Required.

IV&V recommends that project schedule commitments be evaluated to align with approved UAT Plan assumptions related to duration, dependency, and roles

Recommendation 1.1.6.2
IV&V recommends that project schedule commitments be evaluated to align with approved UAT Plan assumptions related to duration, dependency, and roles.
- The single task for UAT Plan is dependent on the Vendor "Conduct UAT Process Training". IV&V has not observed the development of process training materials or other activities that would support readiness for the State development of the UAT Plan.

DHS anticipating receiving additional information on the UAT Process Training and planning. DHS to follow-up 2nd week of April.

IV&V Monthly Budget Summary Description

The IV&V Monthly Budget Summary describes the current and forecast IV&V budget. The current budget forecast for IV&V for the next reporting period is $62,611.21

Details can be requested through Hawai'i DHS if the table is not readable.

IV&V Monthly Budget Summary

Development Project Costs	Total Contract Amount	Actual To Date	Remaining on Contract	Quarter 1 Oct - Dec Total	Quarter 2 Jan - March Total	Quarter 3 Apr - Jun	July	August	Sept	Quarter 4 July - Sept	Reason for Variance or Action Plan to Correct
	Total Contract Amount	**Actual To Date FFY 2026**	**Remaining on Contract**	**Q1 Oct - Dec 2025**	**Q2 Jan - March 2026**	**Q3 April - Jun 2026**	**July 2026**	**August 2026**	**Sept 2026**	**Q4 July - Sept 2026**	**Reason for Variance**
Contractor: TMS IV&V	$2,095,322	$377,682	$1,717,640	$192,810	$184,871	$0	$0		$0	$0	

IV&V Monthly Project Summary Description

The Monthly Project Summary provides a description of the IV&V work completed including Deliverables, Reviews, and Planned Work.

Details can be requested through Hawai'i DHS if the table is not readable.

IV&V Monthly Project Summary

Year/Month	Monthly Summary
2026 - 3	"IV&V PROJECT SUMMARY: WORK COMPLETED: February IVV.5, IVV.7, IVV.10 Report Deliverables Submitted and Approved DED/Deliverable Re-Review and/or related meetings: SI-14, SI-23, SI-32, SI-35 CAP Response reviews OBJECTIVES: Continue CAP analysis, SPRINT evaluations, continue Deliverable and DED reviews WORK IN PROGRESS: March/April IVV.5, IVV.7, IVV.10 Report Deliverables Review of CAP response, DEDs and Deliverables UNPLANNED OR AD-HOC WORK: - PLANNED WORK NOT ACCOMPLISHED: - ACTIVITIES PLANNED FOR THE NEXT REPORTING PERIOD: April IVV.5, IVV.7, IVV.10 Continue CAP response review, SPRINT evaluations, review of vendor artifacts as delivered."

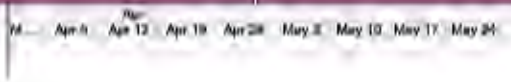
IV&V Calendar and Meeting Register Description

The IV&V Calendar and Meeting Register area provides a summary of IV&V out of office dates, ongoing meetings, and scheduled ad-hoc meetings.

Details can be requested through Hawai'i DHS if the tables are not readable.

IV&V Monthly Calendar

Resource	Start Date	End Date	Days	Forward Contact



IV&V Monthly Meeting Register

Meeting Name	Type	Purpose / Topics Discussed	Meeting Minutes	Minutes A d	Feedback & Follow-ups	Mandatory Att d	Optional Att d	Date - Time

g yp p p g Approved p Attendance Attendance

IV&V Recurring Meeting Register

Meeting Name	Purpose / Topics Discussed	Type	Mandatory Attendance	Optional Attendance	Cadence (Frequency)	Meeting Length (Minutes)
IV&V Observations	Weekly Check-In with TMS (IV&V) vendor to discuss weekly observations and if applicable adhoc items	Recurring	Core Team PMO IV&V Vendor		Weekly Tuesdays 9:00-9:30 am HST & Thursdays 10:00 - 10:30 am HST	30
IV&V Review of Monthly Report	Review of all observations for the month and discussion of items to be included in the Monthly Report that will be distributed to ACF/ETS/DHS Executive Leadership/HI THRIVE project team	Recurring	Core Team PMO IV&V Vendor		Thursday of the 1st week of the following month 9:00 - 9:50 am HST	50
HI THRIVE Core, OET, & Cardy Technical Meeting	Meeting to discuss technical topics relating to the HI THRIVE project. Agenda will be created for each meeting with topics for discussion and sent to attendees before hand. Agenda topics may include architecture, access and controls, interfaces, standards and protocols, etc. Security will be discussed in a separate meeting.	Recurring	Executive Core Team PMO SME - System IV&V Vendor		Every Wednesday 11:00 - 11:50 am HST	50
TMS IV&V - Mark Choi	Discuss CCWIS technical topics with Mark Choi	Recurring	Executive IV&V Vendor	Core Team PMO	Every other Friday 07:30 - 08:00 AM HST	30
Weekly Tech Check-in	•Overall Technical Updates •Items Requiring Intervention •Open Discussion	Recurring	Core Team PMO SME - System IV&V Vendor		Every Thursday 10:00 AM - 10:20 AM HST	20
Bi-Weekly Data Migration Meeting	•Integration and Data Migration Activities	Recurring	Core Team PMO SME - System IV&V Vendor		Every other Wednesday from 11:00 AM to 11:50 AM	50
Bi-weekly Office Hours for Sandbox Walk Thru	Cardinality is hosting optional bi-weekly office hours for users of the sandbox environment to stop by for any questions regarding system access, performance or functionality.	Recurring	Vendor	Core Team PMO SME - Business SME - System IV&V Vendor Training	Every other Friday from 9:30 -10:30 AM	60

Project Meeting Register with IV&V Attendance

Meeting Name	Purpose / Topics Discussed	Type	Mandatory Attendance	Optional Attendance	Meeting Date	Meeting Length (Minutes)
Workplan Review	Review latest DDI System schedule and discuss updates and look for time saving options	Topic	**Core Team PMO Technical Vendor**	SME - System IV&V Vendor	02/04/26	60
DHS CAP Response Completion	• Review DHS response to CAP.1 v3.0 • Update CAP Response Table collaboratively • Final result of meeting is to have an agreed upon CAP to recommend approval to DHS executive leadership	Topic	**Core Team PMO Technical Vendor**	SME - System IV&V Vendor	02/05/26	75
Workplan Review	Review latest DDI System schedule and discuss updates and look for time saving options	Topic	**Core Team PMO Technical Vendor**	SME - System IV&V Vendor	02/05/26	60
Deliverable Review Process Change w/IV&V	Discuss Deliverable Review Roles (Lead Reviewer, Review Group, etc.) and changes to feedback categorization	Topic	**Core Team PMO IV&V Vendor**		02/10/26	30
Deliverable Review Process Change w/Cardy	Discuss Deliverable Review Roles (Lead Reviewer, Review Group, etc.) and changes to feedback categorization	Topic	**Core Team PMO IV&V Vendor Technical Vendor**		02/12/26	30

IV&V Scope and Purpose

This report documents observations that the Technology Management Solutions, Inc. (TMS) Independent Verification and Validation team (IV&V) made on the HI THRIVE Comprehensive Child Welfare Information System (CCWIS) Project during the current reporting period.

The objective of the IV&V efforts is to review and/or test selected HI THRIVE Project processes and products to assure that the associated systems meet functional and non-functional requirements, and are successfully implemented within the processes, time frames, and constraints identified in the HI THRIVE Project contracts. The IV&V team determines whether project staff members are following planned processes, and whether contractor work meets project requirements. The IV&V team provides independent technical review and verification of project deliverables, independent testing and auditing of project deliverables against requirements, and a special emphasis on deliverable quality assurance and reviews of information security control.

The TMS IV&V team approach encourages these positive outcomes:
1. Collaborative identification and communication of successes and recommended improvements.
2. Detection and correction of errors early in the project life cycle.
3. Reduction in development risks, costs and adverse schedule impacts.
4. Enhancement of project products' quality, integrity, and security.
5. Increased visibility into and greater understanding of the project and processes.

IV&V evaluations will include:
1. Review of content quality
2. Review of conformance to standards and best practices
3. Quality assessments of work products
4. Quality assessments of work practices
5. Process improvement identification
6. Recommendations for deficiency remediation

For the detailed scope and approach of the IV&V reviews, assessments and evaluations refer to the IV&V Deliverable: IVV.1 IV&V Management Plan and the IV&V guiding process document IEEE 1012-2016 Standard for System, Software, and Hardware Verification and Validation.